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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Declaration Submitted With Initial Filing Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required) OR

Attorney Docket Number	SSB0004-US
First Named Inventor	Craig FARR
<i>COMPLETE IF KNOWN</i>	
Application Number	10/812,902
Filing Date	March 31, 2004
Art Unit	3624
Examiner Name	To Be Assigned

I hereby declare that:

Residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought as the invention entitled:

METHOD AND SYSTEM FOR PROVIDING DIVIDEND ENHANCED CONVERTIBLE STOCKS WITH ACCELERATION TRIGGERS

the organization of which

(Title of the Invention)

Is attached hereto

88

was filed on (MM/DD/YYYY) **March 31, 2004** as United States Application Number or PCT International Application Number _____.

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as
Application Number 10/812,902 and was amended on (MM/DD/YYYY)

I hereby state that I have reviewed the application as filed and believe it to be in compliance with all applicable requirements except those specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)		Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				<input type="checkbox"/>	<input type="checkbox"/> YES	<input type="checkbox"/> NO
				<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

..... are not listed on a supplemental priority data sheet PTO/SB/028 attached hereto.

Supplemental plan
(Page 1 of 3)

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TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.
If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



PTO/SB/01 (08-03)
Approved for use through 07/31/2008. OMB 0651-0032
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DECLARATION — Utility or Design Patent Application

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<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</p>				
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle (if any))		Family Name FARR		
Inventor's Signature		Date Aug, 23, 2004		
Residence: City Rye	State NY	Country USA	Citizenship Canadian	
Mailing Address 20 Thistle Lane				
City Rye	State NY	Zip 10580	Country US	
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle (if any))		Family Name or Surname		
Inventor's Signature		Date		
Residence: City	State	Country	Citizenship	
Mailing Address				
City	State	Zip	Country	
<input type="checkbox"/> Additional inventors or a legal representative are being named on the _____ supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.				